

Exhibit “A”

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ALABAMA
NORTHERN DIVISION

GERALD RUHNOW; CONNIE
RUHNOW,

PLAINTIFFS,

V.

LANE HEARD TRUCKING, LLC,
et al.,

DEFENDANTS.

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)
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)
)
)

CIVIL ACTION: 2:05-cv-527-F

PLAINTIFFS' INITIAL DISCLOSURES

Come now the plaintiffs in the above styled case and pursuant to Rule 26 of the Federal Rules of Civil Procedure and Local Rule 26.1(a) and hereby submits the following initial disclosures:

A. **The name of each individual believed by it to have discoverable, non-privileged, personal knowledge concerning any significant factual issue in this case, appropriately indicating the subjects about which the person has such knowledge.**

GERALD RUHNOW - is the plaintiff. He has knowledge of the facts in his complaint, and the injuries/damages he has suffered as a result of the actions of the defendants.

CONNIE RUHNOW - is also a plaintiff in this action and the wife of Gerald Ruhnow. She has knowledge of the facts in the complaint, and the injuries/damages she and her husband have suffered as a result of the actions of the defendants.

REPRESENTATIVE FROM DEFENDANT LANE HEARD TRUCKING, LLC - who is most knowledgeable of the facts in Plaintiffs' complaint.

REPRESENTATIVE OF THE ESTATE OF MICHAEL DUKE - has the knowledge of the facts in Plaintiffs' complaint.

CHRISTY LEANN CHAMPION - is one of the defendants and has knowledge of the facts in Plaintiffs' complaint.

MICHAEL ATKINS - has knowledge of the facts in Plaintiffs' complaint.

BARBARA A. LATENSER, MD - Gerald Ruhnow's physician in Iowa, has knowledge of his current medical condition. See attached medical records.

JAMES M. CROSS, MD - Gerald Ruhnow's attending physician at UAB Burn Center in March 2005, and has knowledge of his medical condition. See attached medical records.

RANDALL MULLIN, MD - Gerald Ruhnow's family physician in Iowa and has knowledge of his current medical condition. See attached medical records.

BETHEGAN O'KEEFE, PHD- Gerald Ruhnow's clinical psychologist who has knowledge of Plaintiff's medical condition. See attached report.

B. Make available to other parties under Rule 34 F.R.C.P. all documents, data compilations and tangible things that may be used to support contentions in this case.

Please see attached:

Medical Records on Gerald Ruhnow to date;

Photographs of Gerald Ruhnow's injuries taken on 3/29/2005;

Accident Photographs from Alabama Department of Transportation;

Affidavit of Gene Richardson;

Accident Report.

Plaintiffs reserve the right to supplement responses.

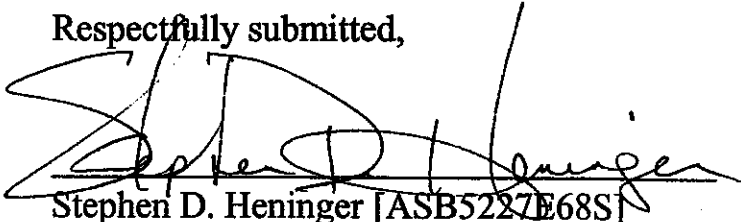
C. Computation of damages claimed.

Damages in this case are properly assessed by a jury, as requested in plaintiff's complaint.

D. Production of Insurance Agreements in Question.

Defendants are in possession of applicable insurance policies.

Respectfully submitted,



Stephen D. Heninger [ASB5227E68S]
Heninger, Burge, Vargo & Davis, LLP
2146 Highland Avenue
Birmingham, Alabama 35205
(Telephone) 205.933.2345
(Facsimile) 205.933.1616
E-mail: Steve@hbvdlaw.com

CERTIFICATE OF SERVICE

I hereby certify that on the 19th day of October, 2005, I electronically filed the foregoing with the via United States Mail to the following:

J. Burruss Riis, Esq.
HAND ARENDALL, LLC
P. O. Box 123
Mobile, Alabama 36601
251-432-5511
(Counsel for Lane Heard Trucking, LLC)

Robert C. Ward, Jr., Esq.
Richard M. Freeman, Jr., Esq.
RUSHTON, STAKELY, JOHNSTON
& GARRETT, P.A.
P. O. Box 270
Montgomery, Alabama 36101-0270
Telephone: 334-206-3100
Facsimile: 334-265-8711
(Counsel for Christy Leann Champion)

Linda Hinson Ambrose, Esq.
ROGERS AND ASSOCIATES
3000 Riverchase Galleria, Suite 650
Birmingham, Alabama 35242
Telephone: 205-982-4620
(Counsel for Northland Insurance Company)

A handwritten signature in black ink, appearing to read "Stephen D. Heninger", is written over a horizontal line.

Stephen D. Heninger [ASB5227E68S]
Heninger, Burge, Vargo & Davis, LLP
2146 Highland Avenue
Birmingham, Alabama 35205
(Telephone) 205.933.2345
(Facsimile) 205.933.1616
E-mail: Steve@hbvdlaw.com

Fatality

AS 17
REV. 1791

MAR 25 2005

ALABAMA UNIFORM TRAFFIC ACCIDENT REPORT

DPS 5506412
Accident No

Shaded Areas To Be Used By Data Processing Only

Sheet 1 of 4 Sheet(s)

Microfilm No.

Local Case No:

[illegible]

SEATING		Other Involved Unit (Circle One)		Other Involved Unit (Circle One)		CODES																																	
Unit 1	<table border="1"> <tr><td>1</td><td>24</td><td>2</td><td>3</td></tr> <tr><td>4</td><td>5</td><td>6</td><td>7</td></tr> <tr><td>8</td><td>9</td><td>10</td><td>11</td></tr> </table>	1	24	2	3	4	5	6	7	8	9	10	11	<table border="1"> <tr><td>12 - Pedestrian</td><td>13 - Rider of Domestic Animal</td><td>14 - Occ. of Non-Motorized Vehicle</td><td>15 - Victim of Other Circumstance/ Codes Not Applicable</td></tr> </table>	12 - Pedestrian	13 - Rider of Domestic Animal	14 - Occ. of Non-Motorized Vehicle	15 - Victim of Other Circumstance/ Codes Not Applicable	Unit 2	<table border="1"> <tr><td>1</td><td>24</td><td>2</td><td>3</td></tr> <tr><td>4</td><td>5</td><td>6</td><td>7</td></tr> <tr><td>8</td><td>9</td><td>10</td><td>11</td></tr> </table>	1	24	2	3	4	5	6	7	8	9	10	11	<table border="1"> <tr><td>12 - Pedestrian</td><td>13 - Rider of Domestic Animal</td><td>14 - Occ. of Non-Motorized Vehicle</td><td>15 - Victim of Other Circumstance/ Codes Not Applicable</td></tr> </table>	12 - Pedestrian	13 - Rider of Domestic Animal	14 - Occ. of Non-Motorized Vehicle	15 - Victim of Other Circumstance/ Codes Not Applicable	SAFETY EQUIPMENT 01 - None Installed 02 - Not Applicable 03 - Unknown (Any Type) 04 - Lap Belt Only 05 - Not Fastened 06 - Not Fastened 07 - Lap/Shoulder Harness 08 - Lap Only Used 09 - Not Used 10 - Shoulder Only Used 11 - Both Used 12 - Motorcycle Helmet 13 - None Used 14 - Used 15 - Air Bags 16 - Deployed, Seats Used 17 - Not Deployed, Seats Used 18 - Deployed, Seats Not Used 19 - Not Deployed, Seats Not Used 20 - Child Restraint 21 - Child Restraint Used 22 - Other Restraint Used 23 - None Used 24 - Pedal Cycle/Pedestrian 25 - Contrasting Clothing 26 - Non-contrasting Clothing	
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VICTIMS Michael Duke 467 Longview Road Pontotoc, Ms Taken To: Troy Regional Medical Center Taken By: Haynes Ambulance		Unit No: 1 Seat Pos: 1 Injury Type: K Age: 36 Sex: M Ejection: N First Aid By: A		Gerald Rubnow 9655 N 1400 Avenue Osco, IL Taken To: Troy Regional Medical Center Taken By: Haynes Ambulance		Unit No: 2 Seat Pos: 1 Injury Type: A Age: 55 Sex: M Ejection: N First Aid By: A																																	
CODES K Killed B Bruise/Abrasion/Swelling A - Visible or Carried Near Scene C - Not Visible - Has Pain/Faint N - Not F - Fully P - Partially T - Trapped U - Unknown A - Not Applicable A - Ambulance Attended D - Doctor M - Paramedic O - Other P - Police U - Unknown N - None																																							
NARRATIVE AND DIAGRAM <p>Officer's Opinion of What Happened: Unit#2 was traveling north on U.S. 231. Unit#1 was traveling south on U.S. 231. A motorcycle from a previous accident that had just occurred was lying in the southbound lane of U.S. 231. Unit#1 topped the hill and struck the motorcycle lying in the roadway. The motorcycle lodged underneath Unit#1 causing the fuel tanks to rupture and explode. Driver of Unit#1 lost control of vehicle and started to travel into the northbound lane. Unit#2 crested the hill traveling north and struck Unit#1 which had just crossed into his lane of travel. Another explosion occurred engulfing both Units in flames.</p>																																							
ROADWAY ENVIRONMENT <table border="1"> <tr> <td>Unit 1</td> <td>Contributing Road Defects</td> <td>Surface Construction</td> <td>Condition</td> <td>Accident in or Related To Road Construction?</td> <td>Material in Roadway (Contributing)</td> <td>Material Source</td> <td>Character</td> </tr> <tr> <td>1</td> <td>④④ None 1 1 - Shoulders Low 2 2 - Shoulders High 3 3 - Holes, Bumps, Etc. 8 8 - Other</td> <td>①① Asphalt 2 2 - Concrete 3 3 - Brick 4 4 - Unpaved 8 8 - Other</td> <td>①① Dry 2 2 - Wet 3 3 - Ice 4 4 - Snowy/Slushy 5 5 - Muddy 8 8 - Other</td> <td>Yes Yes No No</td> <td>①① None 2 2 - Rocks 3 3 - Trees/Limbs 4 4 - Dirt 5 5 - Gravel 6 6 - Oil/Petrol 8 8 - Other</td> <td>①① Not Applicable 2 2 - Natural Environment 3 3 - Dropped From Vehicle 4 4 - Already in Road, But Fell From Vehicle 6 6 - Other 8 8 - Unknown</td> <td>①① Straight-Level 2 2 - Straight-Down Grade 3 3 - Straight-Up Grade 4 4 - Straight-Hillcrest 5 5 - Curve-Level 6 6 - Curve-Down Grade 7 7 - Curve-Up Grade 8 8 - Curve-Hillcrest</td> </tr> <tr> <td>Unit 2</td> <td>2</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>								Unit 1	Contributing Road Defects	Surface Construction	Condition	Accident in or Related To Road Construction?	Material in Roadway (Contributing)	Material Source	Character	1	④④ None 1 1 - Shoulders Low 2 2 - Shoulders High 3 3 - Holes, Bumps, Etc. 8 8 - Other	①① Asphalt 2 2 - Concrete 3 3 - Brick 4 4 - Unpaved 8 8 - Other	①① Dry 2 2 - Wet 3 3 - Ice 4 4 - Snowy/Slushy 5 5 - Muddy 8 8 - Other	Yes Yes No No	①① None 2 2 - Rocks 3 3 - Trees/Limbs 4 4 - Dirt 5 5 - Gravel 6 6 - Oil/Petrol 8 8 - Other	①① Not Applicable 2 2 - Natural Environment 3 3 - Dropped From Vehicle 4 4 - Already in Road, But Fell From Vehicle 6 6 - Other 8 8 - Unknown	①① Straight-Level 2 2 - Straight-Down Grade 3 3 - Straight-Up Grade 4 4 - Straight-Hillcrest 5 5 - Curve-Level 6 6 - Curve-Down Grade 7 7 - Curve-Up Grade 8 8 - Curve-Hillcrest	Unit 2	2														
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The data on this report reflects my best knowledge, opinions and beliefs covering the accident, but no warrant is made as to the factual accuracy thereof. Signature of Investigating Officer: Kevin D. Cook #833 Date: 7 Mar 2005																																							

ALABAMA
UNIFORM TRAFFIC ACCIDENT REPORT

LOCAL CASE NO. 5500412SHEET 2 OF 4 SHEET(S)

AST No. 34 Rev. 4/86

SUPPLEMENTAL SHEET

Unit No.	Seat Pos.	Injury Type	Age	Sex	Ejection	First Aid By

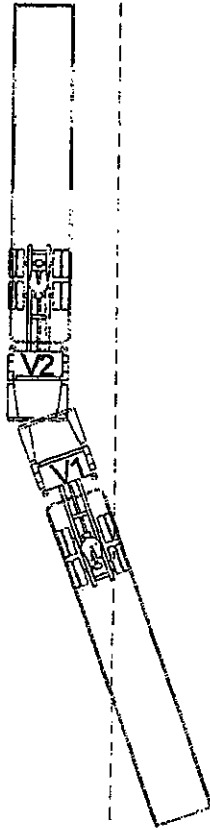
ADDITIONAL ACCIDENT VICTIMS

3	Name	Address							
	Taken to	Taken by							
4	Name	Address							
	Taken to	Taken by							
5	Name	Address							
	Taken to	Taken by							
6	Name	Address							
	Taken to	Taken by							
7	Name	Address							
	Taken to	Taken by							
8	Name	Address							
	Taken to	Taken by							
9	Name	Address							
	Taken to	Taken by							
10	Name	Address							
	Taken to	Taken by							
11	Name	Address							
	Taken to	Taken by							
12	Name	Address							
	Taken to	Taken by							

ADDITIONAL NARRATIVE SPACE

DESCRIBE WHAT HAPPENED (Refer to vehicles by number)

(SEE PAGE #1)



U.S. 231

<p>Diagram Not to Scale</p> <p>Diagram Scale 1 inch = (10 feet)</p>		<p>Location</p> <p>U.S. 231 (Pike County)</p>		<p>Time</p> <p>7:16</p>	
<p>Signature of Reporting Officer(s)</p> <p><i>Kevin D. Cook</i></p>		<p>Officer ID</p> <p>833</p>	<p>Reporting Police Agency ORI</p> <p>ALAST3800</p>		
				<p>Month</p> <p>03</p>	<p>Day</p> <p>07</p>
				<p>Year</p> <p>2005</p>	<p>A.M.</p> <p>P.M.</p> <p>N.T.</p>

Alabama Uniform Traffic Accident Report Truck/Bus Supplemental Sheet

AST-34T
194Unit No. 1
(same as on main report)5506412
Sheet 3 of 4 Sheets

General Instructions

Complete this form for each qualifying vehicle ONLY if the accident meets BOTH of the following criteria:

1. The accident involved a qualifying vehicle (truck with 6 or more tires or Haz/Mat placard, or a bus designed to carry 16 or more, including driver) and;
2. The accident resulted in at least one of the following: A. one or more fatalities B. one or more persons injured and taken from the scene for immediate medical attention, or C. one or more involved vehicles had to be towed from the scene as a result of disabling damage or had to receive assistance to leave.

Screening Information

Number of Qualifying Vehicles:

Trucks with 6 or more tires or Haz/Mat placard 2Buses designed to carry 16 or more (including driver) 0

Number of Persons:

Sustaining fatal injuries 1Transported for immediate medical treatment 1Number of vehicles towed from scene due to damage or provided assistance 2

Vehicle Information

Gross Vehicle Weight Rating (GVWR)

A. Truck, tractor or bus 16,500B. Trailer or trailers (total) 65,000Total GVWR for unit (A+B) 81500Total number of axles 5

Hazardous Material Involvement

Did vehicle have a Haz/Mat placard Yes ☒ No

If Yes, include following information from placard

A. Name or 4-digit number from diamond or box N/AB. The 1 -digit number from bottom of diamond N/AWas hazardous material released from THIS vehicle's cargo? Yes ☒ No

Vehicle Configuration (circle one number)

1. Bus
2. Single unit truck (2 axles/ 6 or more tires)
3. Single unit truck (3 or more axles)
4. Truck with trailer
5. Truck tractor only (bobtail)
- ☒ 6. Tractor with semi-trailer
7. Tractor with double trailers
8. Tractor with triple trailers
9. Unknown class heavy truck
0. Any other 4-wheeled vehicle

Cargo Body Type (circle one number)

1. Bus
- ☒ 2. Van/enclosed box
3. Cargo tank
4. Flatbed
5. Dump
6. Concrete mixer
7. Auto transporter
8. Garbage/refuse
9. Other

Motor Carrier Information

NOTE: If NOT a motor carrier, enter NONE under Carrier Name, 0 for None under Carrier Identification Numbers, and go to Sequence Of Events Section

Carrier Name Lane Heard TruckingSource (circle one number) 1. Vehicle side 2. Shipping papers 3. Driver ☒ 4. OtherCarrier mailing address (Street or P.O. Box) 1010 Hickory Ridge DriveCity, State, Zip New Albany, Mississippi 38863Carrier Identification Numbers (None = 0)US DOT 00568612 ICC MC STATE NO. STATE

Sequence of Events

Note: for THIS vehicle - list up to four Event #1 10 Event #2 6 Event #3 Event #4EVENT
CODES

- | | | | | |
|----------------|------------------------|------------------------|--------------------------|------------------------|
| Non-Collision | 1. Ran off road | 2. Jackknife | 3. Overturned (rollover) | 4. Downhill runaway |
| | 5. Cargo loss or shift | 6. Explosion or fire | 7. Separation of units | 8. Other non-collision |
| Collision With | 9. Pedestrian | 10. Non-parked vehicle | 11. Parked vehicle | 12. Train |
| | 13. Pedal cycle | 14. Animal | 15. Fixed object | 16. Other object |

Signature of Reporting Officer

Officer ID

Reporting Police Agency ORI

Date

Time

AM
PM
MT

833

ALAST3800

7 Mar 2005

7:16

Alabama Uniform Traffic Accident Report Truck/Bus Supplemental Sheet

AST-34T
1 94Unit No. 2
(same as on main report)5506412
Sheet 4 of 4 Sheets

General Instructions

Complete this form for each qualifying vehicle ONLY if the accident meets BOTH of the following criteria:

1. The accident involved a qualifying vehicle (truck with 6 or more tires or Haz/Mat placard, or a bus designed to carry 16 or more, including driver) and;
2. The accident resulted in at least one of the following: A. one or more fatalities B. one or more persons injured and taken from the scene for immediate medical attention, or C. one or more involved vehicles had to be towed from the scene as a result of disabling damage or had to receive assistance to leave.

Screening Information

Number of Qualifying Vehicles:

Trucks with 6 or more tires or Haz/Mat placard 2
 Buses designed to carry 16 or more (including driver) 0

Number of Persons:

Sustaining fatal injuries 1
 Transported for immediate medical treatment 1

Number of vehicles towed from scene due to damage or provided assistance 2

Vehicle Information

Gross Vehicle Weight Rating (GVWR)

A. Truck, tractor or bus 15,000
 B. Trailer or trailers (total) 25,000
 Total GVWR for unit (A+B) 40000

Total number of axles 5

Hazardous Material Involvement

Did vehicle have a Haz/Mat placard Yes ☒ No

If Yes, include following information from placard

A. Name or 4-digit number from diamond or box NAB. The 1 -digit number from bottom of diamond NAWas hazardous material released from THIS vehicle's cargo? Yes ☒ No

Vehicle Configuration (circle one number)

1. Bus ☒ 2. Single unit truck (2 axles/ 6 or more tires) 3. Single unit truck (3 or more axles)
 4. Truck with trailer 5. Truck tractor only (bobtail) 6. Tractor with semi-trailer 7. Tractor with double trailers
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Cargo Body Type (circle one number)

1. Bus 2. Van/enclosed box 3. Cargo tank 4. Flatbed 5. Dump
 6. Concrete mixer 7. Auto transporter 8. Garbage/ refuse 9. Other _____

Motor Carrier Information

NOTE: If NOT a motor carrier, enter NONE under Carrier Name, 0 for None under Carrier Identification Numbers, and go to Sequence Of Events Section

Carrier Name Gerald Ruhnow Trucking

Source (circle one number) 1. Vehicle side 2. Shipping papers 3. Driver 4. Other

Carrier mailing address (Street or P.O. Box) 9655 N 1400 AvenueCity, State, Zip Osco, Illinois 61274Carrier Identification Numbers (0 None = 0)US DOT 00589814 ICC MC _____ STATE NO. _____ STATE _____

Sequence of Events

Note: for THIS vehicle - list up to four Event #1 10 Event #2 6 Event #3 _____ Event #4 _____EVENT
CODES

- Non-Collision 1. Ran off road 2. Jackknife 3. Overturned (rollover) 4. Downhill runaway
 5. Cargo loss or shift 6. Explosion or fire 7. Separation of units 8. Other non-collision
 Collision With 9. Pedestrian 10. Non-parked vehicle 11. Parked vehicle 12. Train
 13. Pedal cycle 14. Animal 15. Fixed object 16. Other object

Signature of Reporting Officer

Officer ID

Reporting Police Agency ORI

Date

Time

AM
PM

833

ALAST3800

7 Mar 2005

7:16